



HASTINGS POLICE DEPARTMENT

101 4th Street East • Hastings, MN 55033-1944
(651) 480-2300 • FAX: (651) 437-1206 • EMAIL: HPD@hastingsmn.gov

Data Subject – Data Request Form

Date of Request: _____

To request data as a data subject, you must show a valid state ID, such as a driver's license, military ID, or passport as proof of identity. See attached "Standards for Verifying Identity".

I am requesting access to data in the following way:

☐ Inspection

☐ Copies

☐ Both Inspection & Copies

Note: Per MN Statute 13.04 Sub. 3, there is no cost for the inspection of data, however the Hastings Police Department may require you to pay the actual costs of making and certifying copies, but will not charge you for compiling the requested data or for separating public from non-public data.

Data Being Requested:

Describe the data you are requesting as specifically as possible.

Case # _____

Officer: _____

Date of Incident: _____

Time of Incident: _____

Location of Incident: _____

Type of Report: _____

Individual(s) Involved: _____

Other: _____

Contact Information

Data subject name _____

Parent/Guardian name (if applicable) _____

Address _____

Phone Number _____ Email _____

Signature of Data Subject or Parent/Guardian _____

STAFF VERIFICATION

Identification Provided _____

Per MN State Statute 13.04 Sub. 3, The Hastings Police Department will respond to your request within 10 business days.